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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 07-01-2014 , and ending 06-30-2015

| | | | |
|---|--|--|--|
| Name of foundation THE MORRIS STULSAFT FOUNDATION | | A Employer identification number 94-6064379 | |
| Number and street (or P O box number if mail is not delivered to street address) 1660 BUSH STREET NO 300 | | B Telephone number (see instructions) (415) 561-6540 | |
| City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94109 | | C If exemption application is pending, check here <input type="checkbox"/> | |
| G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> | |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> | |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16)▶\$ 676,464 | | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> | |
| J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.) | | | |

| Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small> | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants, etc , received (attach schedule) | 1,541,070 | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | 21 | 21 | | |
| | 4 Dividends and interest from securities. | | | | |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) _____ | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | | | | |
| | b Gross sales price for all assets on line 6a _____ | | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 0 | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | | | |
| | c Gross profit or (loss) (attach schedule) | | | | |
| | 11 Other income (attach schedule) | | | | |
| | 12 Total. Add lines 1 through 11 | 1,541,091 | 21 | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc | 4,900 | 1,225 | | 3,430 |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees (attach schedule) | | | | |
| | b Accounting fees (attach schedule) | 4,170 | 2,502 | | 1,251 |
| | c Other professional fees (attach schedule) | 213,468 | 21,347 | | 170,774 |
| | 17 Interest | | | | |
| | 18 Taxes (attach schedule) (see instructions) | 161 | 0 | | 0 |
| | 19 Depreciation (attach schedule) and depletion . . . | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | 1,000 | 100 | | 600 |
| | 22 Printing and publications | | | | |
| | 23 Other expenses (attach schedule) | 1,661 | 232 | | 581 |
| | 24 Total operating and administrative expenses. Add lines 13 through 23 | 225,360 | 25,406 | | 176,636 |
| | 25 Contributions, gifts, grants paid | 1,214,980 | | | 1,214,980 |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 1,440,340 | 25,406 | | 1,391,616 |
| | 27 Subtract line 26 from line 12 | | | | |
| | a Excess of revenue over expenses and disbursements | 100,751 | | | |
| | b Net investment income (if negative, enter -0-) | | 0 | | |
| c Adjusted net income (if negative, enter -0-) | | | | | |

| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year | End of year | |
|-----------------------------|--|---|-------------------|----------------|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 | Cash—non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 110,713 | 176,464 | 176,464 |
| | 3 | Accounts receivable ▶ <u>20,000</u> | | | |
| | | Less allowance for doubtful accounts ▶ _____ | | 20,000 | 20,000 |
| | 4 | Pledges receivable ▶ <u>480,000</u> | | | |
| | | Less allowance for doubtful accounts ▶ _____ | 465,000 | 480,000 | 480,000 |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ _____ | | | |
| | | Less allowance for doubtful accounts ▶ _____ | | | |
| | 8 | Inventories for sale or use | | | |
| | 9 | Prepaid expenses and deferred charges | | | |
| | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | | | |
| | c | Investments—corporate bonds (attach schedule). | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ _____ | | | |
| | Less accumulated depreciation (attach schedule) ▶ _____ | | | | |
| 12 | Investments—mortgage loans | | | | |
| 13 | Investments—other (attach schedule) | | | | |
| 14 | Land, buildings, and equipment basis ▶ _____ | | | | |
| | Less accumulated depreciation (attach schedule) ▶ _____ | | | | |
| 15 | Other assets (describe ▶ _____) | | | | |
| 16 | Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) | 575,713 | 676,464 | 676,464 | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe ▶ _____) | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. | | | | |
| | 24 | Unrestricted | 110,713 | 196,464 | |
| | 25 | Temporarily restricted | 465,000 | 480,000 | |
| | 26 | Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31. | | | | |
| | 27 | Capital stock, trust principal, or current funds | | | |
| | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| | 30 | Total net assets or fund balances (see instructions) | 575,713 | 676,464 | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) . . . | 575,713 | 676,464 | |

| Part III Analysis of Changes in Net Assets or Fund Balances | | |
|---|--|-----------|
| 1 | Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) | 1 575,713 |
| 2 | Enter amount from Part I, line 27a | 2 100,751 |
| 3 | Other increases not included in line 2 (itemize) ▶ _____ | 3 0 |
| 4 | Add lines 1, 2, and 3 | 4 676,464 |
| 5 | Decreases not included in line 2 (itemize) ▶ _____ | 5 0 |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . | 6 676,464 |

Part IV

Capital Gains and Losses for Tax on Investment Income

| | | | | | | |
|--|--|--|---|----------------------------------|--|--|
| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | | |
| 1a | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| (e) Gross sales price | | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (loss) (e) plus (f) minus (g) | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | | | (i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) | |
| (i) F M V as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | | | | 2 | |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 } | | | | | 3 | |

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part


1 Enter the appropriate amount in each column for each year, see instructions before making any entries

| | | | | | |
|---|--|--|---|---|-----------|
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col (b) divided by col (c)) | | |
| 2013 | 1,350,628 | 99,068 | 13 633343 | | |
| 2012 | 1,306,989 | 125,846 | 10 385622 | | |
| 2011 | 1,338,855 | 153,069 | 8 746742 | | |
| 2010 | 1,311,702 | 70,163 | 18 695067 | | |
| 2009 | 1,270,407 | 32,718 | 38 828993 | | |
| 2 Total of line 1, column (d). | | | | 2 | 90 289767 |
| 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | | | | 3 | 18 057953 |
| 4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. | | | | 4 | 131,708 |
| 5 Multiply line 4 by line 3. | | | | 5 | 2,378,377 |
| 6 Enter 1% of net investment income (1% of Part I, line 27b). | | | | 6 | 0 |
| 7 Add lines 5 and 6. | | | | 7 | 2,378,377 |
| 8 Enter qualifying distributions from Part XII, line 4. | | | | 8 | 1,391,616 |
| If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | |

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

| | | | |
|----|---|----|---|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 | | |
| | Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions) | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b | 1 | 0 |
| c | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | 0 |
| 3 | Add lines 1 and 2. | 3 | 0 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 0 |
| 6 | Credits/Payments | | |
| a | 2014 estimated tax payments and 2013 overpayment credited to 2014 | 6a | |
| b | Exempt foreign organizations—tax withheld at source | 6b | |
| c | Tax paid with application for extension of time to file (Form 8868) | 6c | |
| d | Backup withholding erroneously withheld | 6d | |
| 7 | Total credits and payments. Add lines 6a through 6d. | 7 | 0 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached. | 8 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 0 |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> | 11 | |

Part VII-AStatements Regarding Activities

| | | | | |
|----|--|----|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> | 1b | | No |
| c | Did the foundation file Form 1120-POL for this year? | 1c | | No |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ <u>0</u> (2) On foundation managers <input type="checkbox"/> \$ <u>0</u> | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <u>0</u> | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i> | 2 | | No |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i> | 5 | | No |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> CA | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i> | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>  | 10 | Yes | |

Part VII-A

Statements Regarding Activities *(continued)*

| | | | | |
|---|---|----|-----|----|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| Website address ▶ HTTP //WWW PFS-LLC NET/STULSAFT/ | | | | |
| 14 | The books are in care of ▶ PACIFIC FOUNDATION SERVICES LLC Telephone no ▶ (415) 561-6540 Located at ▶ 1660 BUSH STREET SUITE 300 SAN FRANCISCO CA ZIP +4 ▶ 94109 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ | 15 | | |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No |
| See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶ | | | | |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

| | | | | |
|---|---|----|-----|----|
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/> | 1b | | No |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?. <input type="checkbox"/> | 1c | | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| a | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____ | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> | 2b | | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____ | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| b | If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>). <input type="checkbox"/> | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? | 4b | | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

| | | | | |
|--|--|------------------------------|--|----|
| 5a During the year did the foundation pay or incur any amount to | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions). | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? | | 5b | | |
| Organizations relying on a current notice regarding disaster assistance check here. | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| If "Yes," attach the statement required by Regulations section 53.4945–5(d). | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 6b | | No |
| If "Yes" to 6b, file Form 8870. | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? | | 7b | | |

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

| | | | | |
|--|---|---|---|---------------------------------------|
| 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). | | | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| See Additional Data Table | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." | | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000. | | | | 0 |

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". | | |
|--|-----------------------|------------------|
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| PACIFIC FOUNDATION SERVICES LLC 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | FOUNDATION MANAGEMENT | 213,133 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services. | | 0 |

Part IX-A

Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |

Part IX-B

Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|--|--------|
| 1 | |
| | |
| | |
| 2 | |
| | |
| | |
| All other program-related investments See instructions | |
| 3 | |
| | |
| | |
| Total. Add lines 1 through 3 | 0 |

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

| | | | |
|---|--|----|---------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes | | |
| a | Average monthly fair market value of securities. | 1a | 0 |
| b | Average of monthly cash balances. | 1b | 133,714 |
| c | Fair market value of all other assets (see instructions). | 1c | 0 |
| d | Total (add lines 1a, b, and c). | 1d | 133,714 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). | 1e | 0 |
| 2 | Acquisition indebtedness applicable to line 1 assets. | 2 | 0 |
| 3 | Subtract line 2 from line 1d. | 3 | 133,714 |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). | 4 | 2,006 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 131,708 |
| 6 | Minimum investment return. Enter 5% of line 5. | 6 | 6,585 |

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

| | | | |
|----|---|----|-------|
| 1 | Minimum investment return from Part X, line 6. | 1 | 6,585 |
| 2a | Tax on investment income for 2014 from Part VI, line 5. | 2a | |
| b | Income tax for 2014 (This does not include the tax from Part VI). | 2b | |
| c | Add lines 2a and 2b. | 2c | 0 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1. | 3 | 6,585 |
| 4 | Recoveries of amounts treated as qualifying distributions. | 4 | 0 |
| 5 | Add lines 3 and 4. | 5 | 6,585 |
| 6 | Deduction from distributable amount (see instructions). | 6 | 0 |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. | 7 | 6,585 |

Part XII

Qualifying Distributions (see instructions)

| | | | |
|---|--|----|-----------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes | | |
| a | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. | 1a | 1,391,616 |
| b | Program-related investments—total from Part IX-B. | 1b | 0 |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| a | Suitability test (prior IRS approval required). | 3a | |
| b | Cash distribution test (attach the required schedule). | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,391,616 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4. | 6 | 1,391,616 |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2014 from Part XI, line 7 | | | | 6,585 |
| 2 Undistributed income, if any, as of the end of 2014 | | | | |
| a Enter amount for 2013 only. | | | 0 | |
| b Total for prior years 20____, 20____, 20____ | | 0 | | |
| 3 Excess distributions carryover, if any, to 2014 | | | | |
| a From 2009. | 1,270,407 | | | |
| b From 2010. | 1,311,702 | | | |
| c From 2011. | 1,338,855 | | | |
| d From 2012. | 1,306,989 | | | |
| e From 2013. | 1,350,628 | | | |
| f Total of lines 3a through e. | 6,578,581 | | | |
| 4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,391,616 | | | | |
| a Applied to 2013, but not more than line 2a | | | 0 | |
| b Applied to undistributed income of prior years (Election required—see instructions). | | 0 | | |
| c Treated as distributions out of corpus (Election required—see instructions). | 1,391,616 | | | |
| d Applied to 2014 distributable amount. | | | | 0 |
| e Remaining amount distributed out of corpus | 0 | | | |
| 5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).) | 6,585 | | | 6,585 |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,963,612 | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b. | | 0 | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. | | 0 | | |
| d Subtract line 6c from line 6b Taxable amount—see instructions | | 0 | | |
| e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions | | | 0 | |
| f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 | | | | 0 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). | 0 | | | |
| 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . | 1,263,822 | | | |
| 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a | 6,699,790 | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2010. . . . | 1,311,702 | | | |
| b Excess from 2011. . . . | 1,338,855 | | | |
| c Excess from 2012. . . . | 1,306,989 | | | |
| d Excess from 2013. . . . | 1,350,628 | | | |
| e Excess from 2014. . . . | 1,391,616 | | | |

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

| | | | | | | |
|----|--|----------|---------------|----------|----------|-----------|
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | Tax year | Prior 3 years | | | (e) Total |
| | | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | |
| b | 85% of line 2a | | | | | |
| | | | | | | |
| c | Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| | | | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| | | | | | | |
| e | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| | | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| | | | | | | |
| a | "Assets" alternative test—enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| | | | | | | |
| b | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . | | | | | |
| | | | | | | |
| c | "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). (3) Largest amount of support from an exempt organization (4) Gross investment income | | | | | |
| | | | | | | |

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

MARY GREGORY
1660 BUSH STREET SUITE 300
SAN FRANCISCO, CA 94104
(415) 561-6540

b

The form in which applications should be submitted and information and materials they should include

FOR GUIDELINES AND MORE INFORMATION ABOUT THIS FOUNDATION, SEE WWW PFS-LLC NET

c

Any submission deadlines

FOR GUIDELINES AND MORE INFORMATION ABOUT THIS FOUNDATION, SEE WWW PFS-LLC NET

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

FOR GUIDELINES AND MORE INFORMATION ABOUT THIS FOUNDATION, SEE WWW PFS-LLC NET

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|----------------------------------|-----------|
| Name and address (home or business) | | | | |
| a Paid during the year See Additional Data Table | | | | |
| Total | | | 3a | 1,214,980 |
| b Approved for future payment | | | | |
| Total | | | 3b | 0 |

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

| | | | | |
|--|--|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | | |
| (1) Cash. | | 1a(1) | | No |
| (2) Other assets. | | 1a(2) | | No |
| b Other transactions | | | | |
| (1) Sales of assets to a noncharitable exempt organization. | | 1b(1) | | No |
| (2) Purchases of assets from a noncharitable exempt organization. | | 1b(2) | | No |
| (3) Rental of facilities, equipment, or other assets. | | 1b(3) | | No |
| (4) Reimbursement arrangements. | | 1b(4) | | No |
| (5) Loans or loan guarantees. | | 1b(5) | | No |
| (6) Performance of services or membership or fundraising solicitations. | | 1b(6) | | No |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | | 1c | | No |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received | | | | |

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

| b If "Yes," complete the following schedule | | |
|---|--------------------------|---------------------------------|
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
| | | |
| | | |
| | | |
| | | |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.


| | | | | |
|------------------|--|---------------|----------------|---|
| Sign Here | ***** | 2015-10-22 | ***** | <div style="border: 1px solid black; padding: 5px;"> May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> |
| | _____ Signature of officer or trustee | _____ Date | _____ Title | |

| | | | | | |
|-------------------------------|--|----------------------|------|--|-------------------|
| Paid Preparer Use Only | Print/Type preparer's name ROBERT A LEE | Preparer's Signature | Date | Check if self-employed <input checked="" type="checkbox"/> | PTIN P00156212 |
| | Firm's name <input checked="" type="checkbox"/> ROBERT LEE & ASSOCIATES LLP | | | Firm's EIN <input checked="" type="checkbox"/> 27-1155496 | |
| | Firm's address <input checked="" type="checkbox"/> 226 AIRPORT PARKWAY SAN JOSE, CA 95110 | | | Phone no (408) 855-6770 | |


Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|---|---|---------------------------------------|
| ADELE K CORVIN | PRESIDENT 1 00 | 0 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| ISADORE PIVNICK | VICE PRESIDENT 1 00 | 1,100 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| DANA A CORVIN | SECRETARY 1 00 | 0 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| STUART CORVIN | TREASURER 1 00 | 0 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| PAT LOOMES | BOARD MEMBER 1 00 | 2,600 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| WILLIAM GLENN | BOARD MEMBER 1 00 | 1,200 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |
| SCOTT CORVIN | BOARD MEMBER 1 00 | 0 | 0 | 0 |
| 1660 BUSH STREET SUITE 300 SAN FRANCISCO,CA 94109 | | | | |


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------|---|-----------|
| Name and address (home or business) | | | | |
| a Paid during the year | | | | |
| ABODE SERVICES 40849 FREMONT BLVD FREMONT,CA 94538 | | 501 (C)(3) PUBLIC CH | FOR PROJECT INDEPENDENCE, PROVIDING HOUSING AND SUPPORTIVE SERVICES | 15,000 |
| ALAMEDA COUNTY LIBRARY FOUNDATION 2450 STEVENSON BOULEVARD FREMONT,CA 94538 | | 501 (C)(3) PUBLIC CH | FOR TECHNOLOGY AND EQUIPMENT FOR THE NEW LEARNING CENTER AND COMMUNITY ROOM | 25,000 |
| BERNARD OSHER MARIN JEWISH COMMUNITY CENTER 200 N SAN PEDRO ROAD SAN RAFAEL,CA 94903 | | 501 (C)(3) PUBLIC CH | TO SUPPORT EARLY CHILDHOOD PROGRAMS SERVING 180 CHILDREN | 40,000 |
| BIOTECH PARTNERS PO BOX 2186 BERKELEY,CA 94702 | | 501 (C)(3) PUBLIC CH | TO PROVIDE GENERAL SUPPORT TO BIOTECH PARTNERS, SERVING 120 HIGH SCHOOL JUNIORS AND SENIORS | 10,000 |
| BRIGHT FUTURES GROWTH AND DEVELOPMENT CENTER 60 OVERLOOK LANE EL SOBRANTE,CA 94803 | | 501 (C)(3) PUBLIC CH | TO SUPPORT BRIGHT FUTURES GROWTH AND DEVELOPMENT CENTER FOR ITS EARLY CHILDHOOD EDUCATION | 10,000 |
| BRIGHT FUTURES GROWTH AND DEVELOPMENT CENTER 60 OVERLOOK LANE EL SOBRANTE,CA 94803 | | 501 (C)(3) PUBLIC CH | ENRICHING SERVICES FOCUSED ON THE EDUCATION AND DEVELOPMENTAL NEEDS OF UNDERSERVED CHILDREN | 10,000 |
| CALIFORNIA STATE UNIVERSITY EAST BAY FOUNDATION INC 25800 CARLOS BEE BLVD HAYWARD,CA 94542 | | 501 (C)(3) PUBLIC CH | CSUEB RENAISSANCE SCHOLARS PROGRAM SERVING 45 FOSTER YOUTH, AND ITS BRIDGE TO EMANCIPATION | 20,000 |
| CALIFORNIA STATE UNIVERSITY SACRAMENTO 6000 J ST SACRAMENTO,CA 95819 | | 501 (C)(3) PUBLIC CH | HONORARIUM - ANDREA VENEZIA | 1,000 |
| CANAL ALLIANCE 91 LARKSPUR STREET SAN RAFAEL,CA 94901 | | 501 (C)(3) PUBLIC CH | PATHWAYS FOR LOW-INCOME IMMIGRANT YOUTH | 20,000 |
| CANTARE CON VIVO 1611 TELEGRAPH AVENUE SUITE 801 OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | TO SUPPORT THE CHILDREN'S CHOIRS SERVING 2,800 CHILDREN IN OAKLAND'S PUBLIC SCHOOLS | 20,000 |
| CASA OF SAN MATEO COUNTY 330 TWIN DOLPHIN DRIVE SUITE 139 REDWOOD CITY,CA 94065 | | 501 (C)(3) PUBLIC CH | ACADEMIC SUCCESS PROGRAM PROVIDING EDUCATIONAL ADVOCACY TO 300 FOSTER CHILDREN AND YOUTH | 20,000 |
| CENTRO LEGAL DE LA RAZA INC 3022 INTERNATIONAL BLVD SUITE 410 OAKLAND,CA 94601 | | 501 (C)(3) PUBLIC CH | YOUTH LAW ACADEMY, HELPING 66 YOUTH BECOME FUTURE LEADERS AND LEGAL PROFESSIONALS | 15,000 |
| CHILDREN'S HOSPITAL & RESEARCH CENTER AT OAKLAND 747 52ND STREET OAKLAND,CA 94609 | | 501 (C)(3) PUBLIC CH | TRAUMA-INFORMED PROFESSIONAL DEVELOPMENT | 20,000 |
| CHINATOWN COMMUNITY CHILDREN'S CENTER 979 CLAY ST SAN FRANCISCO,CA 94108 | | 501 (C)(3) PUBLIC CH | FAMILY ENGAGEMENT PROGRAMMING AND PROFESSIONAL DEVELOPMENT | 15,000 |
| CHRONICLE SEASON OF SHARING FUND PO BOX 44740 SAN FRANCISCO,CA 94144 | | 501 (C)(3) PUBLIC CH | GENERAL SUPPORT | 10,000 |
| Total  3a | | | | 1,214,980 |


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|--|-----------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| CITY YOUTH NOW 375 WOODSIDE AVE SAN FRANCISCO,CA 94127 | | 501 (C)(3) PUBLIC CH | CITY YOUTH NOWS INTERNSHIP PROGRAM, SERVING APPROXIMATELY 150 YOUTH | 15,000 |
| COMMUNITY INITIATIVES (BAY AREA EARLY CHILDHOOD FUNDERS) 354 PINE STREET SUITE 700 SAN FRANCISCO,CA 94104 | | 501 (C)(3) PUBLIC CH | EARLY CHILDHOOD INFORMATION AND COLLABORATION | 1,000 |
| COMMUNITY INITIATIVES (MISSION SCIENCE WORKSHOPS) 3750 18TH ST SAN FRANCISCO,CA 94114 | | 501 (C)(3) PUBLIC CH | SCIENCE ENRICHMENT EQUITY FUND | 20,000 |
| COMMUNITY MUSIC CENTER 544 CAPP STREET SAN FRANCISCO,CA 94110 | | 501 (C)(3) PUBLIC CH | FOR THE YOUNG MUSICIANS PROGRAM | 10,000 |
| COMPASS FAMILY SERVICES 49 POWELL STREET 3RD FLOOR SAN FRANCISCO,CA 94102 | | 501 (C)(3) PUBLIC CH | FOR GENERAL SUPPORT TO THE COMPASS CHILDRENS CENTER SERVING 70 CHILDREN | 35,000 |
| COUNCIL ON FOUNDATIONS INC 2121 CRYSTAL DRIVE SUITE 700 ARLINGTON,VA 22202 | | 501 (C)(3) PUBLIC CH | 2015 MEMBERSHIP DUES (\$500 DUES, \$2,730 GRANT) | 2,730 |
| DANCE PALACE P O BOX 217 POINT REYES STATION,CA 94956 | | 501 (C)(3) PUBLIC CH | TO SUPPORT THE YOUTH ARTS PROGRAM SERVING 160 CHILDREN IN WEST MARIN | 7,500 |
| DIVISION OF THE SAN MATEO COUNTY HUMAN SERVICES AGENCY (CHILDREN'S FUND) 1 DAVIS DRIVE BELMONT,CA 94002 | | 501 (C)(3) PUBLIC CH | TO PROVIDE REFURBISHED COMPUTERS TO 100 FOSTER YOUTH | 5,000 |
| EACH ONE REACH ONE 146 S SPRUCE AVENUE SOUTH SAN FRANCISCO,CA 94080 | | 501 (C)(3) PUBLIC CH | TO SUPPORT THE PLAYWRITING AND JAZZ DANCE PROGRAMS FOR APPROXIMATELY 70 INCARCERATED YOUTH | 10,000 |
| EAST BAY CENTER FOR THE PERFORMING ARTS 339 - 11TH STREET RICHMOND,CA 94801 | | 501 (C)(3) PUBLIC CH | CENTERS ART AND EDUCATION OUTREACH PROGRAM | 25,000 |
| EAST BAY CHILDREN'S LAW OFFICES INCORPORATED 7700 EDGEWATER DRIVE SUITE 210 OAKLAND,CA 94621 | | 501 (C)(3) PUBLIC CH | EDUCATIONAL ADVOCACY PROGRAM | 15,000 |
| ELEVATING SOULCIETY 28924 RUUS ROAD HAYWARD,CA 94544 | | 501 (C)(3) PUBLIC CH | FOR THE REACH RESCUE PROGRAM TO TRAIN UP TO 20 LOW-INCOME YOUTH TO BECOME EMTS | 20,000 |
| EVA GUNTHER FOUNDATION (ALLIANCE FOR GIRLS) C/O GIRLS INC OF ALAMEDA COUNTY 510 16TH STREET SUITE 100 OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | TO STRENGTHEN GIRLS' LEADERSHIP IN THE SAN FRANCISCO BAY AREA SERVICE SECTOR | 2,500 |
| FIRST 5 ALAMEDA COUNTY 1115 ATLANTIC ALAMEDA,CA 95401 | | 501 (C)(3) PUBLIC CH | TO BEGIN THE DEVELOPMENT OF A BACHELOR'S DEGREE IN EARLY CHILDHOOD EDUCATION | 11,000 |
| FIRST PLACE FOR YOUTH 426 17TH STREET STE 100 OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | FOR GENERAL SUPPORT | 20,000 |
| Total  3a | | | | 1,214,980 |


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|--|-----------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| FORWORDS LITERACY LAB 361 THIRD STREET SUITE G SAN RAFAEL,CA 94901 | | 501 (C)(3) PUBLIC CH | EXPRESS YOURSELF PROGRAM SERVING 200 STUDENTS AND FOR CAPACITY-BUILDING | 15,000 |
| FOUNDATION CENTER 312 SUTTER STREET 606 SAN FRANCISCO,CA 94108 | | 501 (C)(3) PUBLIC CH | THE FOUNDATION CENTER- SAN FRANCISCO 2015 GENERAL SUPPORT REQUEST | 2,500 |
| FOUNDATION FOR HEARING RESEARCH INC (JEAN WEINGARTEN PENINSULA ORAL SCHOOL 3518 JEFFERSON AVENUE REDWOOD CITY,CA 94062 | | 501 (C)(3) PUBLIC CH | FOR JEAN WEINGARTEN PENINSULA ORAL SCHOOL FOR THE DEAF'S PRESCHOOL PROGRAMS | 10,000 |
| GIRLS INCORPORATED OF ALAMEDA COUNTY 510 - 16TH STREET OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | FOR THE EUREKA I TEEN ACHIEVEMENT PROGRAM SERVING 160 GIRLS IN ALAMEDA COUNTY | 25,000 |
| GLENWOOD SCHOOL FOUNDATION 25 WEST CASTLEWOOD DRIVE SAN RAFAEL,CA 94901 | | 501 (C)(3) PUBLIC CH | TO SUPPORT POET IN THE SCHOOLS AND A FIELD TRIP TO A SCIENCE MUSEUM | 1,000 |
| GOOD SAMARITAN FAMILY RESOURCE CENTER OF SAN FRANCISCO 1294 POTRERO AVENUE SAN FRANCISCO,CA 94110 | | 501 (C)(3) PUBLIC CH | FOR EARLY LITERACY PROGRAMS SERVING 200 CHILDREN | 20,000 |
| HUCKLEBERRY YOUTH PROGRAMS INC 3310 GEARY BLVD SAN FRANCISCO,CA 94118 | | 501 (C)(3) PUBLIC CH | HUCKLEBERRY WELLNESS ACADEMY SERVING 140 YOUTH IN SAN FRANCISCO AND MARIN COUNTIES | 25,000 |
| IMAGINE BUS PROJECT 1012 TORNEY AVE SAN FRANCISCO,CA 94129 | | 501 (C)(3) PUBLIC CH | ARTS EDUCATION PROGRAMMING THAT REACHES 1,200 ADJUDICATED AND INCARCERATED YOUTH | 10,000 |
| JEWISH COMMUNITY CENTER OF SAN FRANCISCO 3200 CALIFORNIA STREET SAN FRANCISCO,CA 94118 | | 501 (C)(3) PUBLIC CH | TO SUPPORT EARLY CHILDHOOD PROGRAMS, SERVING 375 CHILDREN | 50,000 |
| JEWISH VOCATIONAL & CAREER COUNSELING SERVICE 225 BUSH STREET SUITE 400 SAN FRANCISCO,CA 941044252 | | 501 (C)(3) PUBLIC CH | TO SUPPORT THE YOUTH EMPLOYMENT SERVICE PROGRAM, SERVING 33 FOSTER YOUTH | 25,000 |
| LARKIN STREET YOUTH SERVICES 134 GOLDEN GATE AVENUE SAN FRANCISCO,CA 94102 | | 501 (C)(3) PUBLIC CH | FOR HOUSING AND SUPPORT SERVICES FOR 275 HOMELESS YOUTH IN SAN FRANCISCO | 20,000 |
| MOTIVATING INSPIRING SUPPORTING AND SERVING SEXUALLY EXPLOITED YOUTH INC 436 14TH ST STE 150 OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | SAFE PLACE ALTERNATIVE PROGRAM TO HELP BETWEEN 65 AND 100 VICTIMS OF CHILD SEXUAL TRAFFICKING | 15,000 |
| MUSEUM OF CHILDREN'S ART 1625 CLAY STREET OAKLAND,CA 95612 | | 501 (C)(3) PUBLIC CH | SCHOOL AND COMMUNITY PROGRAM SERVING 7,500 CHILDREN AND YOUTH | 15,000 |
| NORTH BAY CHILDREN'S CENTER 932 C STREET NOVATO,CA 94949 | | 501 (C)(3) PUBLIC CH | NORTH BAY CHILDRENS CENTERS SCHOOL READINESS PROGRAM IN NOVATO | 15,000 |
| NORTHERN CALIFORNIA GRANTMAKERS 625 MARKET STREET 15TH FLOOR SAN FRANCISCO,CA 94105 | | 501 (C)(3) PUBLIC CH | \$750 DUES, \$1750 GRANT | 1,750 |
| Total  3a | | | | 1,214,980 |


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------|--|-----------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| PAPERMILL CREEK CHILDRENS CORNER 503 B STREET PO BOX 996 POINT REYES,CA 94956 | | 501 (C)(3) PUBLIC CH | FOR SCHOLARSHIP FUNDS FOR THE PRESCHOOL PROGRAM SERVING 24 CHILDREN | 10,000 |
| PENINSULA JEWISH COMMUNITY CENTER 800 FOSTER CITY BLVD FOSTER CITY,CA 94404 | | 501 (C)(3) PUBLIC CH | TO SUPPORT EARLY CHILDHOOD PROGRAMS SERVING 300 CHILDREN | 40,000 |
| PERFORMING ARTS WORKSHOP INC 1661 TENNESSEE STREET SUITE 303 SAN FRANCISCO,CA 94107 | | 501 (C)(3) PUBLIC CH | FOR THE ARTIST-IN-RESIDENCY PROGRAM SERVING OVER 4,400 YOUTH | 10,000 |
| POLICYLINK 1438 WEBSTER STREET SUITE 303 OAKLAND,CA 94612 | | 501 (C)(3) PUBLIC CH | HONORARIUM - JONATHAN MALAGON | 1,000 |
| PORTOLA FAMILY CONNECTION CENTER INC 2565 SAN BRUNO AVE SAN FRANCISCO,CA 94134 | | 501 (C)(3) PUBLIC CH | PROFESSIONAL DEVELOPMENT FOR STAFF OF PORTOLA & EXCELSIOR FAMILY CONNECTIONS | 15,000 |
| PRESCOTT CIRCUS THEATRE 3864 BROWN AVENUE OAKLAND,CA 94619 | | 501 (C)(3) PUBLIC CH | CIRCUS ARTS TRAINING IN THE OAKLAND SCHOOLS | 10,000 |
| PROJECT AVARY INC 1623 5TH AVENUE BLDG C SAN RAFAEL,CA 94901 | | 501 (C)(3) PUBLIC CH | GENERAL OPERATING SUPPORT | 20,000 |
| RAISING A READER SAN FRANCISCO AND ALAMEDA COUNTIES (TANDEM) 470 3RD ST SUITE 102 SAN FRANCISCO,CA 94107 | | 501 (C)(3) PUBLIC CH | TRAINING AND SUPPORT FOR EARLY CHILDHOOD EDUCATORS | 20,000 |
| RANDALL MUSEUM FRIENDS 199 MUSEUM WAY SAN FRANCISCO,CA 94114 | | 501 (C)(3) PUBLIC CH | FOR THE RANDALL CAPITAL CAMPAIGN | 25,000 |
| RAPHAEL HOUSE OF SAN FRANCISCO INC 1065 SUTTER STREET SAN FRANCISCO,CA 94109 | | 501 (C)(3) PUBLIC CH | FOR THE CAPITAL CAMPAIGN FOR THE MAIN BUILDING | 25,000 |
| RICHMOND ART CENTER 2540 BARRETT AVE RICHMOND,CA 94804 | | 501 (C)(3) PUBLIC CH | ARTS IN THE COMMUNITY, PROVIDING ARTS EDUCATION TO 1,700 STUDENTS | 10,000 |
| RYSE INC 205 41ST STREET RICHMOND,CA 94805 | | 501 (C)(3) PUBLIC CH | RYSE CAREER PATHWAYS PROGRAM PROVIDING EMPLOYMENT AND EDUCATION SERVICES | 20,000 |
| SAINT VINCENT'S DAY HOME 1086 EIGHTH ST OAKLAND,CA 94607 | | 501 (C)(3) PUBLIC CH | PROFESSIONAL DEVELOPMENT FOR EARLY CHILDHOOD EDUCATION STAFF, SERVING 210 CHILDREN | 15,000 |
| SAN DOMENICO SCHOOL 1500 BUTTERFIELD ROAD SAN ANSELMO,CA 94960 | | 501 (C)(3) PUBLIC CH | TO PROVIDE SCHOLARSHIP FUNDS FOR THE VIRTUOSO PROGRAM | 6,000 |
| SAN FRANCISCO ARTS EDUCATION PROJECT 135 VAN NESS AVENUE SAN FRANCISCO,CA 94102 | | 501 (C)(3) PUBLIC CH | ARTISTS-IN-RESIDENCES PROGRAM | 10,000 |
| Total  3a | | | | 1,214,980 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------|---|-----------|
| Name and address (home or business) | | | | |
| a Paid during the year | | | | |
| SAN FRANCISCO CONSERVATION CORPS 5 THOMAS MELLON CIRCLE SUITE 248 SAN FRANCISCO,CA 94134 | | 501 (C)(3) PUBLIC CH | TO PROVIDE JOB AND LIFE SKILLS TRAINING TO 40 LOW-INCOME YOUNG PEOPLE IN SAN FRANCISCO | 15,000 |
| SAN FRANCISCO STUDY CENTER DBA BROTHERS ON THE RISE 1470 FRUITVALE AVENUE OAKLAND,CA 94601 | | 501 (C)(3) PUBLIC CH | TO SERVE 150 4TH-12TH GRADE MALE YOUTH OF COLOR IN OAKLAND THROUGH BROTHERS ON THE RISE | 20,000 |
| SHAKESPEARE - SAN FRANCISCO PO BOX 460937 SAN FRANCISCO,CA 94146 | | 501 (C)(3) PUBLIC CH | MIDNIGHT SHAKESPEARE PROGRAM TEACHING ACTING AND UNDERSTANDING OF SHAKESPEARE | 10,000 |
| SHORELINE ACRES INC 40 JOHN STREET - PO BOX 161 TOMALES,CA 94971 | | 501 (C)(3) PUBLIC CH | FOR SCHOLARSHIP FUNDS FOR THE PRESCHOOL PROGRAM SERVING 22 CHILDREN | 11,000 |
| SLIDE RANCH 2025 SHORELINE HIGHWAY MUIR BEACH,CA 94965 | | 501 (C)(3) PUBLIC CH | GREENHOUSE TO SUPPORT EDUCATIONAL PROGRAMMING | 10,000 |
| SOUTH OF MARKET CHILD CARE INC 790 FOLSOM STREET SAN FRANCISCO,CA 94107 | | 501 (C)(3) PUBLIC CH | PROFESSIONAL DEVELOPMENT OF STAFF MEMBERS PROVIDING EARLY CHILDHOOD EDUCATION | 20,000 |
| SOUTH SAN FRANCISCO FRIENDS OF THE LIBRARY 840 WEST ORANGE AVENUE SOUTH SAN FRANCISCO,CA 94080 | | 501 (C)(3) PUBLIC CH | REDESIGN AND REPURPOSING OF THE SOUTH SAN FRANCISCO GRAND AVENUE BRANCH LIBRARY | 25,000 |
| ST MARY'S CENTER 925 BROCKHURST ST OAKLAND,CA 94608 | | 501 (C)(3) PUBLIC CH | TO SUPPORT ST MARYS PRESCHOOL SERVING 48 LOW-INCOME STUDENTS AND THEIR FAMILIES | 15,000 |
| SUCCESS CENTER SAN FRANCISCO 375 WOODSIDE AVENUE BUILDING W-2 SAN FRANCISCO,CA 94127 | | 501 (C)(3) PUBLIC CH | NEW DIRECTIONS EMPLOYMENT PROGRAM PROVIDING JOB-READINESS TRAINING AND SUPPORT SERVICES | 20,000 |
| SUNNY HILLS SERVICES 300 SUNNY HILLS DRIVE SAN ANSELMO,CA 94960 | | 501 (C)(3) PUBLIC CH | TO SUPPORT OUR SPACE WHICH WILL PROVIDE MENTAL HEALTH AND SOCIAL SERVICES | 10,000 |
| THE UNIVERSITY CORPORATION SAN FRANCISCO STATE 1600 HOLLOWAY AVENUE ADM 153 SAN FRANCISCO,CA 94132 | | 501 (C)(3) PUBLIC CH | TO HELP COVER THE COSTS OF STAFF FOR THE GUARDIAN SCHOLARS PROGRAM | 25,000 |
| TIDES CENTER (YOUTH ART EXCHANGE) 755 OCEAN AVENUE SAN FRANCISCO,CA 94112 | | 501 (C)(3) PUBLIC CH | YOUTH ART EXCHANGE, SERVING 250 LOW-INCOME SAN FRANCISCO PUBLIC HIGH SCHOOL STUDENTS | 20,000 |
| VISITACION VALLEY MIDDLE SCHOOL 450 RAYMOND AVE SAN FRANCISCO,CA 94134 | | 501 (C)(3) PUBLIC CH | TO SUPPORT THE SCHOOL'S PARTNERSHIP WITH OUTWARD BOUND | 1,000 |
| WOMENS AUDIO MISSION 542-544 NATOMA STREET C-1 SAN FRANCISCO,CA 94103 | | 501 (C)(3) PUBLIC CH | TO SUPPORT WAMS MUSIC TECHNOLOGY PROGRAMS FOR APPROXIMATELY 35 GIRLS AGES 15 TO 18 | 10,000 |
| YOUTH HOMES PO BOX 5759 WALNUT CREEK,CA 94596 | | 501 (C)(3) PUBLIC CH | TO SUPPORT YHS GROUP HOMES, SERVING APPROXIMATELY 120 YOUTH EVERY YEAR | 25,000 |
| Total  3a | | | | 1,214,980 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------|---|-----------|
| Name and address (home or business) | | | | |
| a <i>Paid during the year</i> | | | | |
| YOUTH UPRISING 8711 MACARTHUR BLVD OAKLAND,CA 94605 | | 501 (C)(3) PUBLIC CH | TO SERVE 178 FOSTER YOUTH PARTICIPATING IN YU ACHIEVE | 15,000 |
| ZSHARP (ETM - BAY AREA) 564 MARKET STREET SUITE 623 SAN FRANCISCO,CA 94104 | | 501 (C)(3) PUBLIC CH | ZSHARP FOR SCHOLARSHIP SCHOOLS IN OAKLAND AND WEST CONTRA COSTA COUNTY SCHOOL DISTRICTS | 25,000 |
| Total  3a | | | | 1,214,980 |

TY 2014 Accounting Fees Schedule

Name: THE MORRIS STULSAFT FOUNDATION

EIN: 94-6064379

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------|--------|--------------------------|------------------------|---|
| ACCOUNTING FEES | 4,170 | 2,502 | | 1,251 |

TY 2014 Distribution from Corpus Election

Name: THE MORRIS STULSAFT FOUNDATION

EIN: 94-6064379

Election: PURSUANT TO IRC SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2),
THE MORRIS STULSAFT FOUNDATION HERBY ELECTS TO TREAT
CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE
IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME
AND THE AMOUNT NEEDED TO SATISFY THE CURRENT YEAR
DISTRIBUTION REQUIREMENTS AS BEING MADE OUT OF CORPUS.

TY 2014 Other Expenses Schedule**Name:** THE MORRIS STULSAFT FOUNDATION**EIN:** 94-6064379

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------------------|-----------------------------------|--------------------------|---------------------|--|
| DUES AND SUBSCRIPTIONS | 830 | 166 | | 581 |
| INSURANCE AND OTHER | 765 | 0 | | 0 |
| BANK FEES | 66 | 66 | | 0 |

TY 2014 Other Professional Fees Schedule**Name:** THE MORRIS STULSAFT FOUNDATION**EIN:** 94-6064379

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------------|---------|--------------------------|------------------------|---|
| FOUNDATION MANAGEMENT | 213,133 | 21,313 | | 170,506 |
| CONSULTING | 335 | 34 | | 268 |

TY 2014 Substantial Contributors Schedule

Name: THE MORRIS STULSAFT FOUNDATION

EIN: 94-6064379

| Name | Address |
|-------------------------------------|--|
| THE MORRIS STULSAFT TESTAMENTARY TR | P O BOX 3700 SAN FRANCISCO,CA 941370001 |
| CHAMBERLIN TRUST | 999 FIFTH AVENUE SAN RAFAEL,CA 94901 |

TY 2014 Taxes Schedule

Name: THE MORRIS STULSAFT FOUNDATION

EIN: 94-6064379

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-------------------|--------|--------------------------|------------------------|---|
| STATE FILING FEES | 161 | 0 | | 0 |

| | | |
|---|--|---|
| <div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div> | <div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div> | <div>OMB No 1545-0047</div> <div>2014</div> |
|---|--|---|

| | |
|---|---|
| <div>Name of the organization</div> <div>THE MORRIS STULSAFT FOUNDATION</div> | <div>Employer identification number</div> <div>94-6064379</div> |
|---|---|

Organization type (check one)

| | |
|---|--|
| <div>Filers of:</div> <div>Form 990 or 990-EZ</div> | <div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div></div> |
| <div>Form 990-PF</div> | <div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div> |

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number
94-6064379

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 1 | THE CHAMBERLAIN EXEMPTION TRUST 999 FIFTH AVENUE SUITE 200 SAN RAFAEL, CA 94901 | \$ 15,000 | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | THE MORRIS STULSAFT TESTAMENTARY TR PO BOX 3700 SAN FRANCISCO, CA 94137 | \$ 1,443,230 | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | ESTATE OF BOAT CHAMBERLAIN C/O COMERICA BANK TRUST NA 350 10TH SAN DIEGO, CA 921018706 | \$ 82,840 | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |

Employer identification number
94-6064379

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| <u>1</u> | INTEREST ON CHAMBERLAIN TRUST | \$ 15,000 | 2015-06-30 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

| | |
|---|---|
| Name of organization THE MORRIS STULSAFT FOUNDATION | Employer identification number 94-6064379 |
|---|---|

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------------------|---------------------|--|-------------------------------------|
| — | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee | |
| _____ | | _____ | |
| _____ | | _____ | |
| _____ | | _____ | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| — | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee | |
| _____ | | _____ | |
| _____ | | _____ | |
| _____ | | _____ | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| — | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee | |
| _____ | | _____ | |
| _____ | | _____ | |
| _____ | | _____ | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| — | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP 4 | | Relationship of transferor to transferee | |
| _____ | | _____ | |
| _____ | | _____ | |
| _____ | | _____ | |